

H-8213

1 Amend House File 2435 as follows:

2 1. Page 61, after line 32 by inserting:

3 <DIVISION  
4 WHOLE WOMAN'S HEALTH FUNDING PRIORITIES ACT

5 Sec. \_\_\_\_ . LEGISLATIVE FINDINGS.

6 1. The general assembly finds all of the following:

7 a. Limited federal and state public funding exists  
8 for family planning and preventive health services for  
9 women generally, and for maternal and fetal patients in  
10 particular. Fiscal constraints mandate that the state  
11 allocate available funding efficiently. The principal  
12 means by which the state may fulfill its duty to manage  
13 these funds is to ensure that funds are distributed by  
14 priority to the most efficient point-of-service health  
15 care providers. The general assembly finds that public  
16 and private providers of primary and preventive care  
17 utilize public funds more effectively than providers of  
18 health care services that are specialized to particular  
19 medical services or discrete patient populations.  
20 Consequently, it is the intent of the general assembly  
21 through this Act, and any rules and policies adopted  
22 under this Act, to prioritize the distribution and  
23 utilization of public funds for family planning,  
24 reproductive health care, and maternal and fetal care  
25 to such public and private primary and preventive care  
26 providers.

27 b. Prioritization of public health care funding  
28 to primary and preventive care also reflects sound  
29 health care policy. Individuals who have a primary  
30 care clinician are more likely to access health  
31 care services, leading to more favorable long-term  
32 outcomes. Health care costs are lowered when primary  
33 and preventive care is provided by such primary care  
34 clinicians in a setting that addresses the whole  
35 person by emphasizing counseling, screening, and  
36 early detection of leading causes of morbidity and  
37 mortality including diabetes, hypertension, obesity,  
38 cardiovascular and renal diseases, and asthma.  
39 Indirect costs such as lost worker productivity and  
40 employer health care costs are also reduced. Most  
41 importantly, individual citizens will lead longer,  
42 healthier, and happier lives as a result of having less  
43 fragmented health care.

44 c. (1) It is also the public policy of this state  
45 to ensure delivery of comprehensive preconception and  
46 prenatal care for maternal and fetal patients in order  
47 to reduce maternal and fetal morbidity and mortality.

48 (2) The national prevention strategy published  
49 in June 2011 by the national prevention, health  
50 promotion, and public health council created pursuant

1 to section 4001 of the federal Patient Protection and  
2 Affordable Care Act, Pub. L. No. 111-148, states that  
3 "Comprehensive preconception and prenatal care includes  
4 encouraging women to stop smoking, refrain from using  
5 alcohol and other drugs, eat a healthy diet, take folic  
6 acid supplements, maintain a healthy weight, control  
7 high blood pressure and diabetes, and reduce exposure  
8 to workplace and environmental hazards. In addition,  
9 screening and providing services to prevent intimate  
10 partner violence and infections (e.g., HIV, STI, and  
11 viral hepatitis) help to improve the health of the  
12 mother and the baby."

13 (3) The general assembly finds that delivery of  
14 these critical services is best accomplished through  
15 a single point-of-service provider such as a primary  
16 care provider, and directed by a primary care clinician  
17 who has knowledge of the patient's medical history and  
18 personal, familial, and environmental health factors.  
19 The utilization of public funding to maximize effective  
20 delivery of holistic prenatal and maternal health  
21 care conflicts with medical intervention models that  
22 emphasize the provision of services to discrete patient  
23 subpopulations, including women of child-bearing age,  
24 to address discrete patient conditions, or provide  
25 particular therapies.

26 d. The general assembly also finds that it is  
27 the policy of this state that federal public funds  
28 shall not be provided for the direct or indirect  
29 costs, including but not limited to administrative  
30 costs or expenses, overhead, employee salaries, rent,  
31 and telephone and other utilities of non-federally  
32 qualified abortions, abortion referral, or abortion  
33 counseling, and these activities shall not be  
34 subsidized, either directly or indirectly, by federal  
35 public funds.

36 Sec. \_\_\_\_ . NEW SECTION. 146A.1

37 This chapter shall be known and may be cited as the  
38 "*Whole Woman's Health Funding Priorities Act*".

39 Sec. \_\_\_\_ . NEW SECTION. 146A.2 Definitions.

40 As used in this chapter, unless the context  
41 otherwise requires:

42 1. "*Abortion*" means abortion as defined in section  
43 146.1.

44 2. "*Department*" means department as defined in  
45 section 7E.4.

46 3. "*Federally qualified abortion*" means an abortion  
47 qualified for federal reimbursement under the medical  
48 assistance program pursuant to 42 U.S.C. § 1396, et  
49 seq., as amended.

50 4. "*Federally qualified health center*" means a

1 health care provider that is eligible for federal  
2 funding under 42 U.S.C. § 1396d(1)(2)(B).

3 5. "*Hospital*" means a primary or tertiary care  
4 facility licensed pursuant to chapter 135B.

5 6. "*Public funds*" means state funds from whatever  
6 source, including without limitation state general  
7 funds, state special account and limited purpose grants  
8 or loans, and federal funds provided under Title X of  
9 the federal Public Health Service Act, 42 U.S.C. § 300,  
10 et seq.; Title V of the federal Social Security Act, 42  
11 U.S.C. § 701, et seq.; Title XIX of the federal Social  
12 Security Act, 42 U.S.C. § 1396, et seq.; or Title XX  
13 of the federal Social Security Act, 42 U.S.C. § 1397,  
14 et seq.

15 7. "*Rural health clinic*" means a health care  
16 provider that is eligible for federal funding under 42  
17 U.S.C. § 1395x(aa)(2).

18 Sec. \_\_\_\_ . NEW SECTION. 146A.3 Prioritization of  
19 public funds to health care entities.

20 1. Subject to any applicable requirements  
21 of federal law, regulations, or guidelines, any  
22 expenditures or grants of public funds for family  
23 planning services by the state made by a department  
24 shall be made in the following order of priority:

25 a. To public entities.

26 b. To nonpublic hospitals and federally qualified  
27 health centers.

28 c. To rural health clinics.

29 d. To nonpublic health providers that have as their  
30 primary purpose the provision of the primary health  
31 care services specified in 42 U.S.C. § 254b(b)(1).

32 2. A department shall not enter into a contract  
33 with, or make a grant to, any entity that performs  
34 abortions that are not federally qualified abortions or  
35 maintains or operates a facility where abortions that  
36 are not federally qualified abortions are performed.

37 Sec. \_\_\_\_ . NEW SECTION. 146A.4 Enforcement.

38 1. The attorney general may bring an action in  
39 law or equity to enforce the provisions of this  
40 chapter, and relief shall be available in appropriate  
41 circumstances including recoupment and declaratory  
42 and injunctive relief, including without limitation  
43 suspension or disbarment.

44 2. Any entity eligible for the receipt of public  
45 funds shall have standing to bring any action that  
46 the attorney general is authorized to bring pursuant  
47 to this section, if an expenditure or grant of public  
48 funds made in violation of this chapter has resulted in  
49 the reduction of public funds available to the entity,  
50 and any award of monetary relief shall be deposited in

1 a state-maintained fund or account for public funds.

2 3. In an action brought under this section, a  
3 prevailing plaintiff shall be entitled to an award of  
4 reasonable attorney fees and costs.

5 Sec. \_\_\_\_\_. NEW SECTION. 146A.5 **Right of**  
6 **intervention.**

7 A member of the general assembly may intervene in  
8 any case in which the constitutionality of this chapter  
9 is challenged as a matter of right.

10 Sec. \_\_\_\_\_. NEW SECTION. 146A.6 **Severability.**

11 If any provision of this chapter or its application  
12 to any person or circumstance is held invalid,  
13 the invalidity does not affect other provisions or  
14 application of this chapter which can be given effect  
15 without the invalid provision or application, and to  
16 this end the provisions of this chapter are severable.

17 Sec. \_\_\_\_\_. NEW SECTION. 146A.7 **Effect on**  
18 **expenditures.**

19 Any expenditure of public funds made by the  
20 department in violation of the provisions of this  
21 chapter shall be null and void, and the funds allocated  
22 pursuant to such expenditures shall be reallocated to  
23 eligible entities.>

24 2. By renumbering as necessary.

---

SWEENEY of Hardin

---

SHAW of Pocahontas

---

ALONS of Sioux

---

PEARSON of Polk